FORM D

ORIGINAL

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

Section
FEB IA //IIIA

Washington, DC

SEC

Mall Processing

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

11356	08Jk				
OMB APPROVAL					
OMB Number: 3235-0076					
Expires: April 30, 2008					
Estimated average burden					

hours per respon	se 16.00					
SEC USE	ONLY					
Prefix	Serial					
DATE RECEIVED						
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series E Preferred Stock Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) MarketTools, Inc.	08040080
Address of Executive Offices (Number and Street, City, State, Zip Code) 150 Spear Street, Suite 600, San Francisco, CA 94105	Telephone Number (Including Area Code) (415) 957-2200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Innovation and expertise in market research.	
Type of Business Organization	PROCESOES
corporation imited partnership, already formed	ELD -
business trust limited partnership, to be formed othe	r (plots Bsp2cify)2006
Actual or Estimated Date of Incorporation or Organization: Month Year	HOMSON Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIE	EICATION DATA				-
A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	☒	Executive Officer	☒	Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)			<u> </u>				
Johnson, Amal							,	
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)						
C/o MarketTools, Inc., 150	Spear Street, Suite 6	00, San Francisco, CA 94	1105					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☒	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Arnold, Scott	f individual)							
Business or Residence Addre	ss (Number and Stree	et City State Zin Code)				-		
C/o MarketTools, Inc., 150	•		1105					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	findividual)		•					
Business or Residence Addre	ss (Number and Stree	t. City. State. Zip Code)						
C/o Oak Hill Venture Partn			ark, C.	A 94025				
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)							
Cakebread, Steve								
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)						
C/o MarketTools, Inc., 150	Spear Street, Suite 6	00, San Francisco, CA 94	1105					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if	findividual)							
Fuguitt, Gayle								
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)						
C/o General Mills, Inc., 1 G	eneral Mills Blvd, M	linneapolis, MN 55426						
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	findividual)							
Hamilton, Judith								
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)						
C/o MarketTools, Inc., 150	Spear Street, Suite 6	00, San Francisco, CA 94	1105					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if	findividual)			· 				
Jones, Craig				<u></u>				
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)						
C/o Ticonderoga Capital, 40 Williams Street, Suite G40, Wellesley, MA 02481								
	(Use blank	sheet, or copy and use add	litional	copies of this sheet	as ne	cessary)		

[Click]

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, i	f individual)						
Krentz, Jeff			 .				
Business or Residence Addre	•		100005				
C/o The Kantar Group, 501	- <u>-</u>	_					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer		General and/or Managing Partner		
Full Name (Last name first, i	f individual)						
Lussier, Richard	01 1 15	G': G: 7' G I \					
Business or Residence Addre	•	, City, State, Zip Code)					
9 Betty Lane, Atherton, CA	94027						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, i	f individual)						
Rolnick, Michael							
Business or Residence Addre	ess (Number and Street	, City, State, Zip Code)					
C/o Communications Ventu	ires, 305 Lytton Aven	iue, Palo Alto, CA 94301					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or		
					Managing Partner		
Full Name (Last name first, i	f individual)						
Advanced Equities, Inc.	,						
Business or Residence Addre	ess (Number and Street	, City, State, Zip Code)		•			
311 S. Wacker Drive, Suite		• • • • •	ember				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or		
		Z zemenouzi o mior			Managing Partner		
Full Name (Last name first, i	f individual)	,					
Communications Ventures	,						
Business or Residence Addre	ess (Number and Street	. City. State. Zip Code)					
305 Lytton Avenue, Palo Al	`						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or		
——————————————————————————————————————					Managing Partner		
Full Name (Last name first, i	f individual)						
General Mills, Inc.	_			. .			
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)					
1 General Mills Blvd, Minn	eapolis, MN 55426, A	Attn: Gayle Fuguitt					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, i	f individual)						
Proctor and Gamble Comp	any						
Business or Residence Addre	 	. City. State. Zin Code)					
1 Proctor & Gamble Plaza,	•		Neven				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or		
Full Name (Last name first, in	f individual)		······································	-	Managing Partner		
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)					
	· · · · ·	<u> </u>	litional copies of this shee	t, as necessary)	·		
[Click]							

				В.	INFOR	MATION A	ABOUT OF	FERING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No ⊠		
1. 1143	Answer also in Appendix, Column 2, if filing under ULOE.											_
2. Wh	··								\$	N/A		
3. Doe	. Does the offering permit joint ownership of a single unit?									Yes ⊠	No □	
4. Ente	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar											
	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or											
	i five (5) persons ler only.	s to be listed:	are associated	d persons of	such a broker	or dealer, ye	ou may set fo	rth the inforn	nation for the	at broker or		
	e (Last name fir	st, if individu	ıal)									•
Business	or Residence Ac	ddress (Numl	ber and Stree	t, City, State	, Zip Code)							
Name of	Associated Brok	er or Dealer									····	<u></u>
States in	Which Person L	isted Has Sol	licited or Inte	ends to Solic	it Purchasers							
	a "All States" or						*******************************	**************			□ Al	II States
` [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	ןוDן
(IL)	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	- •	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[ОН]	[OK]	(OR)	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	{WY}	[PR]
Full Nam	e (Last name fir	st if individu	ıal)								<u></u>	
	0 (230) 114110 111	J., 11 11101110	,		•							
Business	or Residence Ac	ddress (Numl	ber and Stree	t, City, State	, Zip Code)				<u>.</u>			
	or Residence Ad Associated Brok	· .	ber and Stree	t, City, State	, Zip Code)							
Name of		ker or Dealer										
Name of States in	Associated Brok	ker or Dealer	licited or Inte	ends to Solic	it Purchasers							Il States
Name of States in	Associated Brok Which Person L	ker or Dealer	licited or Inte	ends to Solic	it Purchasers		[DE]	[DC]	[FL]	[GA]	(H1)	II States
Name of States in (Check	Associated Brok Which Person L "All States" or	ker or Dealer isted Has Sol check indivi	licited or Inte	ends to Solic	it Purchasers	•••••••••••					_	
Name of States in (Check	Associated Brok Which Person L "All States" or [AK]	ser or Dealer isted Has Sol check indivi	licited or Inte duals States) [AR]	ends to Solic	it Purchasers	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
Name of States in (Check [AL]	Associated Brok Which Person L "All States" or [AK]	isted Has Sol check indivi [AZ]	licited or Inte duals States) [AR] [KS]	[CA]	(CO)	[CT] [ME]	[DE] [MD]	[DC] [[MA]	[FL] [MI]	[GA] [MN]	 [HI] [MS]	[ID] [MO]
Name of States in (Check [AL] [IL] [MT] [RI]	Associated Brok Which Person L "All States" or [AK] [IN]	isted Has Sol check indivi [AZ] [IA] [NV]	licited or Inte duals States) [AR] [KS] [NH]	[CA] [KY]	(CO)	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI]	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC]	isted Has Sol check indivi [AZ] [IA] [NV] [SD]	licited or Inte duals States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir	isted Has Sol check indivi [AZ] [IA] [NV] [SD]	licited or Inte duals States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir or Residence Accessions	isted Has Sol check indivi [AZ] [IA] [NV] [SD] st, if individu	licited or Inte duals States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business Name of States in	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir or Residence Ac	isted Has Sol check indivi [AZ] [IA] [NV] [SD] st, if individuater or Dealer	licited or Inte duals States) [AR] [KS] [NH] [TN] ber and Stree	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business Name of States in	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir or Residence Ac Associated Brok Which Person L	isted Has Sol check indivi [AZ] [IA] [NV] [SD] st, if individuater or Dealer	licited or Inte duals States) [AR] [KS] [NH] [TN] ber and Stree	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] ([MA] (ND)	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business Name of States in (Check	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir or Residence Ac Associated Brok Which Person L ("All States" or	isted Has Sol check indivi [AZ] [IA] [NV] [SD] st, if individuater or Dealer isted Has Sol check individuates (Number of Dealer)	licited or Inte duals States) [AR] [KS] [NH] [TN] aal) ber and Stree dicited or Inte duals States)	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Name of States in (Check [AL] [IL] [MT] [RI] Full Nam Business Name of States in (Check [AL]	Associated Brok Which Person L ("All States" or [AK] [IN] [NE] [SC] e (Last name fir or Residence Ac Associated Brok Which Person L ("All States" or [AK] [IN]	isted Has Sol check indivi [AZ] [IA] [NV] [SD] st, if individuates (Number or Dealer isted Has Sol check individuals [AZ]	[AR] [KS] [NH] [TN] Deer and Street licited or Interduals States) [AR]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

[Click]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security Debt	Offering Price	Sold \$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ 24,999,999.26	\$18,313,258.21
	Answer also in Appendix, Column 3, if filing under ULOE.		-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	4	\$ <u>18,313,258.21</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	_	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	s
	Regulation A		\$
	Rule 504		s
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$100,000.00
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)		\$
	Total	\boxtimes	\$100,000.00

<u>c.</u>	OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND USE OF PROCEEDS	The second secon	
	total expenses furnished in response to Part C	e offering price given in response to Part C - Question 1 and C - Question 4.a. This difference is the "adjusted gross	d	\$ <u>24,899,999,26</u>
5.	the purposes shown. If the amount for any put	ss proceeds to the issuer used or proposed to be used for each rose is not known, furnish an estimate and check the box to salisted must equal the adjusted gross proceeds to the issuer ove.	the	
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		. 🗆 s	□ s
	Purchase of real estate		. 🗆 s	□ s
	Purchase, rental or leasing and installation of	f machinery and equipment	. 🗆 s	□ s
	Construction or leasing of plant buildings an	d facilities	. 🔲 s	□ s
	Acquisition of other businesses (including the used in exchange for the assets or securities	e value of securities involved in this offering that may be of another issuer pursuant to a merger)	. 🗆 s	□ s
	Repayment of indebtedness		. 🗆 s	□ s
	Working capital		. 🗆 s	∑ \$ <u>24,899,999,26</u>
	Other (specify):		. 🗆 s	□ s
	Column Totals		. 🗆 s	∑ \$ <u>24,899,999.26</u>
	Total Payments Listed (column totals a	dded)	🛭 \$ <u>24,89</u>	9,999.26
] [erin (j. 1815).	D. FEDERAL SIGNATURE		
und	issuer has duly caused this notice to be signed by lertaking by the issuer to furnish the U.S. Securitived investor pursuant to paragraph (b)(2) of Ru	the undersigned duly authorized person. If this notice is filed uses and Exchange Compaission, upon written request of its staffule 502.	ander Rule 505, the following f, the information furnished b	signature constitutes an by the issuer to any non-
Iss	uer (Print or Type)	Signature II	ate	
	rketTools, Inc. me of Signer (Print or Type)	Title/of Signer (Print or Type)	February 12, 2008	· · · · · · · · · · · · · · · · · · ·
	ott Arnold	Title of Sigher (Print or Type) Chick Operating Officer		
			EN	
		ATTENTION		

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)